

# Form CPF M 102: Campaign Finance Report

Municipal Form
ELECTION COMMISSION

CITY OF CAMBRIDGE ELECTION COMMISSION

Fil	e with:		) A II: 35				2010 JAN 20	A 10: 59
Ci	y or Town	Clerk or Election Commission	Please print or type a	ıll informatio	on, except sign	natures.		
	Fill in C	dates: And the state of the sta	Month Date	Year 2009	Ending _	Month 12	Date 31	Year 2 <i>00</i> 9
		f report: (Check one) ay preceding preliminary	√ □8th day preceding of	election	30 day after e	election	year-end report	□dissolution
Full Name of Candidate (if applicable)  School Connitte Mander  Office Sought and District  12 Upton Street, Canbridge Min  Residential Address  (617) 491-8436  Tel. No. (optional)  COMMITTEE TO ELECTOMMITTEE T				e Name LONT-SM (TH) tee Treasurer BRIDGE, MA 02139				
		Line 2: Total Line 3: Subto Line 4: Total Line 5: Endir Line 6: Total Line 7: Total	SUMMARY BA  ng balance from particle this personal (line 1 plus line 2)  expenditures this personal contribution (all) outstanding list of bank(s) used	orevious iod (page 2 s period inus line 4) ns this period abilities (j	report , line 11) (page 3, line 1	S S S (4) S S  S	3,270.89 3,417.30 6,688.19 2,751.26 3,936.93 0.00 4,000.00	
	I certify the finance accompanient	of Committee Treasurer: hat I have examined this report in ctivity, including all contribution if finance activity of all persons act	ns, loans, receipts, expenditures, o cting under the authority or on be	lisbursements, ir	i-kind contribution mittee in accordan	ıs and liabi	lities for this reporting per	riod and represents the
		FOR C	ANDIDATE FILIN	GS ONLY	(CANDIDATE	MUST S	IGN BELOW)	
17/10	I certify to finance a contribut Candi	t of Candidate: (check 1 box of idate with Committee and no a that I have examined this report in ctivity, of all persons acting und ions, incurred any liabilities nor idate without Committee OR Chat I have examined this report in ctivity, including contributions,	activity independent of the com- including attached schedules and ler the authority or on behalf of a made any expenditures on my be Candidate with independent ac- including attached schedules and	it is, to the best this committee in half during this it tivity filing sepa it is, to the best	accordance with eporting period. arate report of my knowledge	the require	ments of M.G.L. c. 55. 11	have not received any

campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

#### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

umber on e	Name and Residential Address	Occupation & Employer			
Date Received	· ·		unt	(for contributions of \$200 or more)	
2.000.1.00	BERMAN, LAWRENCE				
10/29/09	i ·	100	an	·	
	MALENFANT, GAVIN & JANET			GM: VP PROJECT MANAGEMENT, GENZYME,	
10/17/09	16 BLAKE ST, CAMBRIDGE, MA 02140	200	00	JM: SELF-EMPLOYED ARTIST	
	MUDD, CUCIA			-	
10/18/09	23 LANCASTER ST, CAMBRIDGE, MA 02140	50	00		
	QUIGLEY, MEGAN			·	
10/19/09	45 FENNO ST, CAMBELDGE, MA 02138	50	00		
, ,	RINDOS, NOAH	100			
0/19/09		100	00		
-1. / .	TURKEL, ALICE	n		HOUSE DUTIES	
0/21/09	12 UPTON ST, CAMBRIDGE MA 02139	2,357	70	(CANDIDATE)	
ماديات	TURKEL, ALICE	<b> </b>	<b>6</b> 1	AS ABOVE	
0/24/09	AS ABOVE	211	51	PIS PIECE	
10.1	THEKEL, ALICE	106	<b>E</b> 2	·	
1/24/09		106	22		
11/5/09	WADA, PATRICIA	50			
11/2/01	30 UPTON ST, CAMBRIDGE, MA 02139	10	$\infty$		
				·	
			Ĺ		
	•				
Line 9:	Total receipts in excess of \$50 (or listed above)	3,225	74		
	Total receipts \$50 and under* (not listed above)	191	56		
	TOTAL RECEIPTS IN THE PERIOD	<del></del>	30	Enter on page 1, line 2	
Line 11:	IVIAL RECEII IS IN THE LERIOD	3,417	120	Line on page 1, mile 2	

<sup>\*</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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### SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
امارما	C - MCC1 - C D M D M - 4	678 MASS. AVE	PRINTING OF ELECTION MATERIA	E	T
10/19/09	CLASSIC GRAPHX	CAMBRICEE, MA 02139	ON RED PAPER	50	58
, ,		25 DORCHESTER AVE #1	FINAL MAILING OF		1
10/21/09	USPS, FORT POINT	BOSTON, MA 02205	ELECTION MATERIAL	2,357	70
0/24/09	USPS, FORT POINT	AS ABOVE	MAILING OF ELECTION MATERIAL TO LATE REGISTERED VOTERS	211	SI
		,			
	·				
	Palaman A Administration of the Control of the Cont				
			***************************************		
•					
				The state of the s	
		Line 12: J	Expenditures over \$50	2,619	79
		Line 13: 1	Expenditures \$50 and under*	131	47
E	Enter on page 1, line 4	Line 14:7	TOTAL EXPENDITURES	2,151	26

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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#### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
				ļ
		Line 15:	In-kind over \$50	
			In-kind \$50 and under	
	Enter on page 1, line 6	Line 17	: Total In-kind	0.00

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date	To Whom Due	Address	Purpose	Amount
Incurred		12 UPTON ST	INITIAL FUNDS FOR	
7/9/09	ALICETURKEL	CAMBRIDGE, MA 02139		4,000.00
		·		
		•		
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	4,000.00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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